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A Brief History of PHSSR: The National Coordinating Center. Lessons From History

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A Brief History of PHSSR The National Coordinating Center. Lessons from History

February 17 , 2011

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National Coordinating Center for PHSSR

THE MISSION OF PUBLIC HEALTH IS FULFILLING SOCIETY' S INTEREST IN ASSURING CONDITIONS IN WHICH PEOPLE CAN BE HEALTHY.

The public health **system** is more than just the official governmental public health agency. It is:

- All public, private, and voluntary entities that contribute to public health in a given area.
- A network of entities with differing roles, relationships, and interactions.
- All entities contribute to the health and well-being of our population
- PHSSR looks at both the **department** and the **system**

How Do We Decide What Public Health Looks Like?

The most robust approach to assessing need seems to be the use of a functional analysis based on the ability to provide the essential public health services, as recommended above. The committee recognizes the potential value of a recommendation regarding the development of a formula to determine the “critical mass” of services and population (e.g., a ratio of one of each of the critical professions per 50,000 or 100,000 population), the geographic accessibility of services, and the workforce capacity necessary for the effective development of local public health agencies to serve small or remote communities. Before such a recommendation can be made, however, solid, practice-oriented research must be conducted to provide the evidence on which to base a formula or other criteria.

[The Future of the Public's Health in the 21st Century](#) IOM 2002

The Need for Research in Public Health Services and Systems

Research is needed to guide policy decisions that shape public health practice. The committee had hoped to provide specific guidance elaborating on the types and levels of workforce, infrastructure, related resources, and financial investments necessary to ensure the availability of essential public health services to all of the nation's communities. However, such evidence is limited, and there is no agenda or support for this type of research, despite the critical need for such data to promote and protect the nation's health

[The Future of the Public's Health in the 21st Century](#) IOM 2002

What is Public Health Services & Systems Research (PHSSR) ?

A field of study that examines the *organization*, *financing*, and *delivery* of public health services at local, state and national levels, and the *impact* of these activities on public health.

Mays, Halverson, and Scutchfield. 2003

PHSSR Includes several concepts

- PHSR is a multidisciplinary field of study that recognizes and investigates system-level properties and outcomes that result from the dynamic interactions among various components of the public health system and how those interactions affect organizations, communities, environments, and population health status.
- The public health system includes governmental public health agencies engaged in providing the ten essential public health services, along with other public and private sector entities with missions that affect public health.
- The term “services” broadly includes programs, direct services, policies, laws, and regulations designed to protect and promote the public’s health and prevent disease and disability at the population level.

Kara put the logic model from this article here on this slide, please. I don't know how to cut and paste it in.

Figure 1. Conceptual framework to measure performance of the public health system.

Source: Adapted with permission from Handler A, Issel M, Turnock B. Conceptual framework to measure performance of the public health system. American Journal of Public Health. 2001;91(8)1235–1239.

Present at the Creation

- CDC meeting 2001 on NPHPSP and its use in research
- CDC meeting to discuss using HSR methods in public health
- AcademyHealth SIG established
- RWJF Establishes PHSSR program in 2004, initial programs
 - HCFO/NNPHI Research Awards
 - Data repository
 - National Meetings -AH and Keeneland
 - Typology of LHDs
 - PBRN
- RWJF Establishes National Coordinating Center in 2010

What did we need and do early on?

- **Data**
 - HSRR Listing
 - Data Harmonization
 - Bibliographic citations
- **Researchers**
 - Mini-grants
- **Venues and opportunities for net working**
 - Keeneland Conference
 - AcademyHealth PHSR Special Interest Group
- **Funding for research**
 - RWJ/NNPHI
- **Linkage of practice to research and translation**
 - PBRNs
 - Communication/website/Social networking



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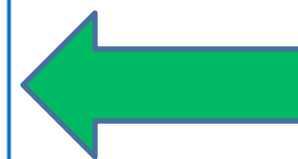
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Browse PHSR Titles

1	1996-7 National Profile of Local Health Departments
2	1999 Local Health Department Infrastructure Survey
3	2003 National Survey of Physicians and Quality of Care
4	2005 National Profile of Local Health Departments
5	AHRQ Quality Indicators
6	American Legacy Longitudinal Tobacco Use Reduction Study
7	American Stop Smoking Intervention Study
8	ASPH Annual Data Report
9	Assessing Core Capacity for Infectious Diseases Surveillance
10	Assessment Protocol for Excellence in Public Health

Data Harmonization

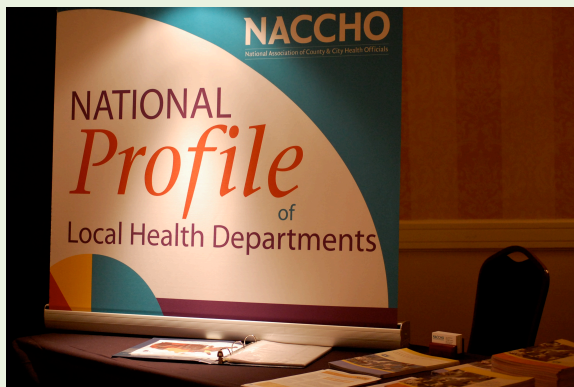
The Data Harmonization Advisory Committee consists of members from the Public Health Systems

Research (PHSR) community including:

- NACCHO
- ASTHO
- NALBOH
- Academic researchers,
- Public health practitioners at local and state level

Primary goal of the Committee:

- To review and facilitate standardization of the primary data survey instruments used by NACCHO, ASTHO and NALBOH



Collaboration will help to achieve:

- create internal consistency across the surveys
- support the advocacy needs of local and state public health departments and local boards of health
- Provide good data for use by PHSSR researchers.

Complete Projects:

- Standardized definitions of common words and phrases used within each survey-Data Dictionary
- Psychometrically sound questions
- Mission based survey questionnaires
- Collaboration in administration and data sharing , data use policy
- **Current updates available**
[on UK-CPHSSR website](#)

PHSSR Endnote Library



Our intention is that the library provided on this website will stand as the cornerstone for a database of PHSSR references.

Click on EndNote logo to access [PHSSR Library webpage](#)

Download the Entire Updated PHSSR Reference Library as of December 2010

Import as an XML file, [PHSSRAUG2010XML](#)

Researchers and Venue



PHSSR Mini-Grantee Program – Since the initial call for the proposals, UK-CPHSSR has awarded mini-grants to 22 junior faculty or doctoral dissertation candidates from across the nation. The mini-grantees have presented their research at the [AcademyHealth](#) & [APHA](#) annual meetings



PHSSR Keeneland Conference – The center has successfully organized the Keeneland Conference for the past three years. This year's [Keeneland Conference](#) will be held April 12-14 in Lexington, KY .

Linkage to Practice

Practice Based Research Network (PBRN) Glen Mays, PhD, MPH



PBRNs allow practicing health care providers to collaborate with researchers in designing, implementing, evaluating, and diffusing solutions to real-world problems in clinical practice.

Public Health Finance Peggy Honore, PhD



A field of study that examines the acquisition, utilization, and management of resources for the delivery of public health functions and the impact of these resources on population health and the public health system.

National Coordinating Center for PHSSR

- [RWJF](#) Funded Coordinating center for PHSSR work
- Awarded Competitively to UK
- Five Pillars
 - Education of Researchers
 - Education of Practitioners to use research
 - Increased base of Funding for Research
 - Increased current grant funding for research
 - Technical Assistance, communication, dissemination, utilization and visibility of PHSSR



Lead by National Advisory Committee

- Linda Bilheimer, Ph.D.
- Scott Burris, J.D.
- Michael Caldwell, M.D., M.P.H.
- Philip Huang, M.D., M.P.H.
- Robert Kaplan, Ph.D.
Chair
- Carol Moehrle, RN, B.S.N.
- Judy Monroe, M.D.,
FAAFP
- Carmen Nevarez, M.D.,
M.P.H.
- Ed Sanchez, M.D., M.P.H.
- Steve Shortell, Ph.D.,
M.B.A., M.P.H.
- Eduardo Simoes, M.D.,
M.Sc., M.P.H.
- Steve Thacker, M.D.,
M.Sc.
- William Vega, Ph.D.

National Advisory Committee (NAC)

Linda Bilheimer, Scott Burris, Michael Caldwell, Philip Huang, Robert Kaplan, Carol Moehrle, Judy Monroe, Carmen Nevarez, Ed Sanchez, Steve Shortell, Eduardo Simoes, Steve Thacker, William Vega, Ph.D.

Senior Leaders to Guide the Work of NCC

Researcher Workgroup	Practitioner Workgroup	Increase Researchers	Expanding Funding
<u>Building Evidence:</u> Glen Mays <u>Data Integration:</u> Jeff Jones	Paul Erwin Phyllis Meadows	F. D. Scutchfield	Julia Costich F. D. Scutchfield

Robert Wood Johnson Foundation

Debra Perez, Katie Wehr, and the RWJF Public Health Team

Communication and Promotion of PHSSR

- The Coordinating Center will stay connected to its audience via email and various social media outlets.
- The marketing and communications team has developed an editorial calendar to ensure the PHSSR community is informed about the latest articles, webinars and discussions on a weekly basis.
- Close to 1000 public health researchers, practitioners and policymakers have joined the PHSSR community.
- The center exhibits at up to four trade shows a year to inform attendees about the benefits of joining the PHSSR community.
- Communication from the center always closes with the motto, **“Stay connected. Stay informed”**.

PHSSR VISIBILITY

- In addition to the e-alerts and newsletters, information is posted on [Facebook](#), [Twitter](#), [YouTube](#).
- One of the primary goals of the National Coordinating Center is to increase the visibility of PHSSR among the three key audiences.
- Press releases and newsletters are distributed to ASPH, ASTHO, NACCHO and other organizations that support PHSSR.



What have we learned

- Funding is key, Willie Sutton principle applies in the academy, if you fund it they will come
- Transitioning a researcher from an existing comfortable research area to a new one is hard, it is easier to grow new ones
- With practitioners, if you build it they won't come, you have to go to them
- Things that work in HSR in general also work in PHSSR, like typology, QI, accreditation

Future Directions of PHSSR:

Establishing the Research Agenda

- October 2010 4 RWJF/CPHSSR commissioned 4 research teams to conduct systematic reviews.
 - Organization and Health Department Structure
 - Justeen Hyde & Steve Shortell
 - Quality Improvement
 - Julia Dilley, Betty Bekemeier, & Jeff Harris
 - Public Health Workforce
 - Angela Beck, Tracy Hilliard, & Matt Boulton
 - PHSSR Methodology
 - Jenine Harris, Kate Beatty, & Glen Mays
- The purpose of the reviews is to set the future research agenda for PHSSR.

Organization and Health Department Structure

- Public health infrastructure changes have been limited
- Critical challenges exist in the areas of:
 - Workforce
 - Organizational capacity
 - Financial resources

Organization and Health Department Structure Future Directions

- Build evidence that performance produces better health outcomes
 - Best restructure of agency to achieve efficiencies, improve performance and create positive health outcomes
- Develop an agreed-upon standardized method for measuring public health expenditures
 - Greater definition and standardization of financing can improve the quality of our local, state and national research

Quality Improvement

- Limited studies relating public health QI efforts with changes in:
 - Consistent improvement of public health performance
 - Positive changes in public health outcomes

Quality Improvement Future Directions

- Efforts to definitively “connect the dots” between QI efforts, resulting practice improvements, and changes in population health status
- Describe QI models that work best in different public health departments or systems, and characteristics of effective implementation of QI interventions in diverse public health organizations
 - Large government public health agencies vs. small health departments vs. tribal health agencies

Public Health Workforce

- Current literature makes it difficult to develop an accurate assessment of workforce effectiveness and its impact on population health
- However, literature indicates sustainable funding is critical to supporting evidence-based workforce development initiatives

Public Health Workforce Future Directions

- Identify methods for determining size and composition of the public health workforce
- Identify and analyze the associations between workforce characteristics and health outcomes
- Match public health workforce diversity with the increasingly diverse populations served by the system
- Improve the recruitment and retention of highly-trained, well-prepared employees, and create succession plans to replace retirees

PHSSR Methodology

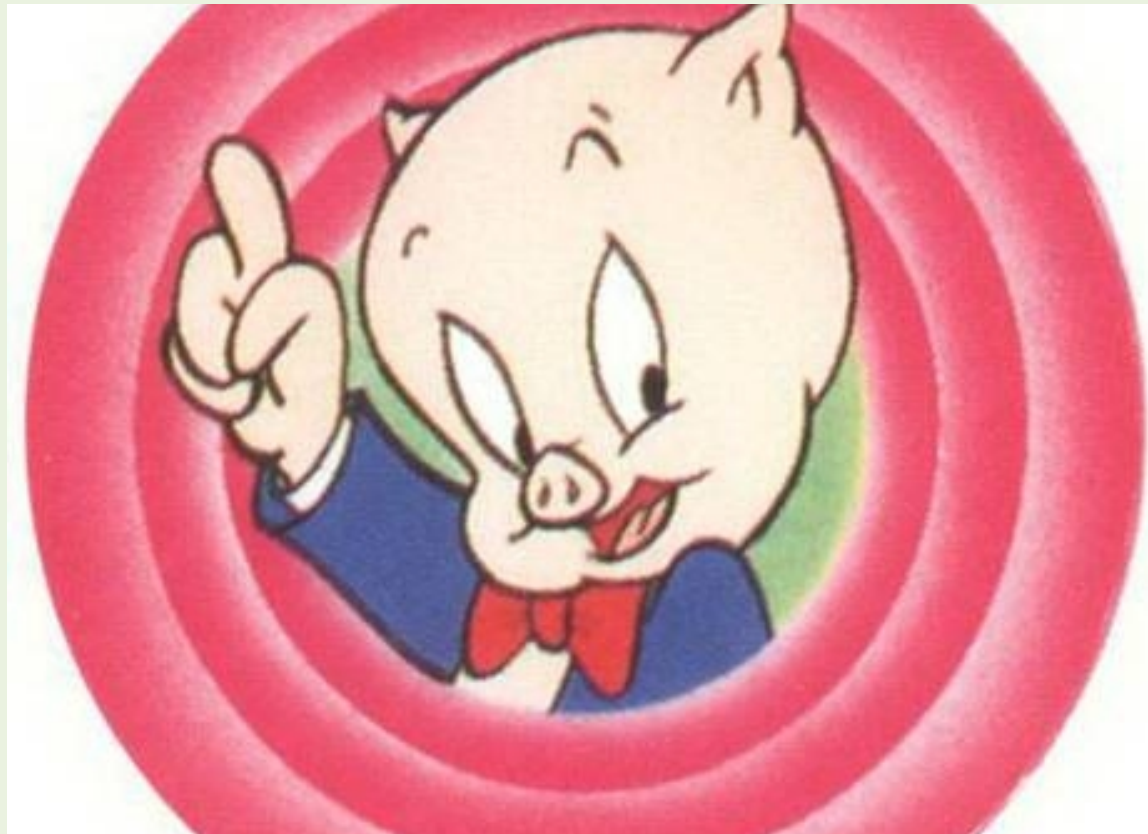
- PHSSR has grown rapidly in recent years
- Challenges facing the field of PHSSR include:
 - Study design (over reliance on cross sectional)
 - Validity of studies is limited (lack of power analysis)
 - Use of non-validated instruments
 - Limited use of complex data analysis methods
 - Limited discussion of external and internal validity

PHSSR Methodology Future Directions

- Need for more complex methodological approach
 - Use of complex research designs that capture the nested and relational aspects of public health systems
 - Use of sophisticated analytic techniques, such as multilevel and systems methods, that account for the nested and relational aspects of public health systems

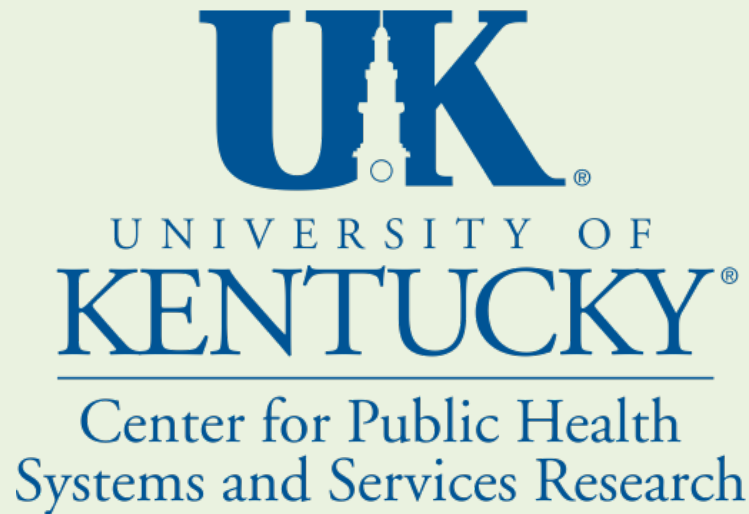
Additional Thoughts on PHSSR

- Questions from practice are always more interesting
- Categorical disease approaches are the enemy of PHSSR, but also provide some salvation
- With many players and organizations in PH, coordination is essential
- Little to no respect and what we do is hard to explain
- We need new data, particularly financial data and longitudinal data
- We have some research agendas, but many are out of date and need upgrading
- ACA presents lots of opportunity for PHSSR, we must carpe diem
- How do we get interest from Feds other than CDC; like NIH's CTSA and AHRQ Comparative Effectiveness and HIT work
- We need to use new and more robust methodology for our efforts



**That's All Folks
Questions?**

For more information contact:



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